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METRIC PROPERTIES OF THE MacDQoL IN FRENCH, GERMAN, ITALIAN, AND AMERICAN POPULATIONS: AN INDIVIDUALISED QoL INSTRUMENT SPECIFIC TO MACULAR DISEASE (MD)

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OBJECTIVES: The MacDQoL showed good metric properties in previous UK work. The aim of this survey was to confirm these results in other countries and explore possibilities of subscales. **METHODS:** Two clinical trials were pooled (France 120; Germany 126, Italy 139; USA 412). Principal component analyses (Varimax) was conducted on baseline data from separate countries. Factorial structures were compared between countries and Cronbach's alpha curves were used to identify subscale scores. Four groups of patients were identified according to visual acuity (VA) in their best eye (BE<5/10; BE ≥5/10) and worst eye (WE<1/10; WE ≥1/10) and were used to investigate (ANOVA) the sensitivity of MacDQoL to VA and compare with the NEI-VFQ-25 generic visual function instrument. **RESULTS:** Mean age 76.8 years: 55.8% women. All had wet age-related MD (often progressing rapidly to severe visual impairment). Strong correlations between the 22 items ($r > 0.50$) and factor loadings > 0.49 on a forced one-factor analysis supported use of an overall weighted impact score. Four subscales were indicated (Cronbach's $\alpha > 0.7$) measuring: essential tasks, family/social life, activities/capabilities, and embarrassment. Patients with BE VA<5/10 and WE VA<1/10 produced significantly worse scores than those with BE VA ≥5/10 and WE VA ≥1/10 (MacDQoL $p < 0.0001$; NEI-VFQ-25 $p < 0.0001$; global scores). MacDQoL score variation coefficients were lower (better) than those of NEI-VFQ-25. **CONCLUSIONS:** The analysis confirmed the metric properties of the MacDQoL.. The MacDQoL is associated with VA though, as expected, not as closely as the NEI-VFQ25 visual function measure, but offers a broader individualised measure of the impact of MD on QoL.